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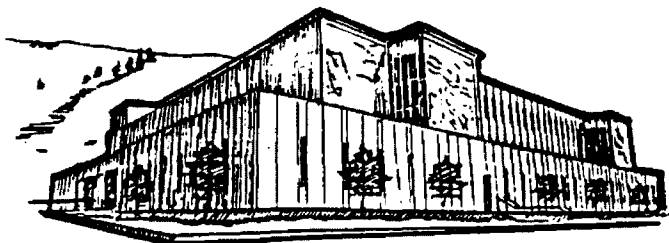
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University of  
**Montana**



THE FOSTER GRANDPARENT PROGRAM

AN ANALYSIS OF CHANGING TRENDS

BY

Ann Freeman Cook

B.A., Carroll College, 1970

Presented in partial fulfillment of the requirements

for the degree of

Master of Public Administration

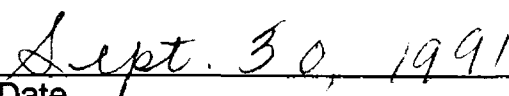
University of Montana

1991

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The Foster Grandparent Program: An Analysis of Changing Trends (63 pp.)

Director: Pat Edgar, D.P.A.

#### ABSTRACT

The Foster Grandparent Program was a federal initiative, established in 1965. Intended as a response to the poverty and isolation prevalent among the elderly, the program enrolled low income senior citizens and provided an hourly tax free stipend in exchange for the daily support they provided to targeted children. Throughout the years of program operation, there has been no systematic study of the entry level characteristics of newly enrolled Foster Grandparents. This would seem to be important information because the age, health and education status of the enrolled individuals could have some bearing on the selection of appropriate child directed activities. This paper will examine some of the entry level characteristics of newly enrolled Foster Grandparents and discuss the relevance of those trends to specific program management issues. A ten year span of time will provide the basis for the study.

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## CHAPTER ONE

### INTRODUCTION AND HISTORY

The federally authorized Foster Grandparent Program was established in 1965 as a specific response to problems which had been identified in the elderly population. It has been suggested to be piecemeal legislation, typical of policy formulation in the United States (Rich, 1984). The characteristics of the aging population helped to shape the objectives of the program. As the characteristics of the elderly population change, it is critical to examine the objectives of the program so that the policy analysis reflects the confrontation between objectives and resources necessary to achieve the objectives (Wildavsky, 1988). In the case of the Foster Grandparent Program, the characteristics of eligible participants affect the jobs that are designed. The design of the jobs and the roles chosen for the Foster Grandparents, have a direct relationship to the success or failure of program objectives. In order to understand that framework, it is important to understand the genesis of the Foster Grandparent Program, the development of program objectives and the changing characteristics of the eligible senior population.

The elderly population began to receive Congressional scrutiny in 1959 when the Senate established the Subcommittee on the Problems of the



Aged and Aging (Rich, 1984). The subcommittee concluded that the problems of the elderly were of such "grave concern as to require the full time and attention of a special committee of the Senate" (Rich, 1984, p. 8). Originally, the Committee was to issue a full report and disband by January 31, 1962. However, the Committee remained active and currently has evolved into the Senate Select Committee on Aging. The principal function of the committee was to act as a legislative catalyst and target issues of vital concern to elderly Americans. In particular, the Committee was directed to study problems of health maintenance, employment, housing and financial assistance (Rich, 1984).

Because of the special status, it was possible for the Committee to attract broad based membership and to operate in a wide area. Public hearings were held as a way to substantiate problems and test proposed legislative action (Rich, 1984). Among the issues identified, poverty and isolation were regarded as particularly critical (Puner, 1974, p. 105). As the problems of the elderly received more attention, presidential decisions supported policy changes which would aid the elderly as well as other clientele groups (Lammers, 1983). The Johnson administration was particularly involved in policy development and, as a tool, President Johnson established seventeen task forces comprised primarily of University professors (Kearns, 1976, p. 210). Johnson awarded those teams the responsibility of identifying the major issues underlying a wide variety of social problems. Proposed solutions, offered by the task forces, could evolve into legislative action.

Since basic economic security was a primary, philosophical objective of liberal politics, supporting legislation offering a wide variety of assistance was rapidly prepared (Kearns, 1976). In 1965 alone, sixty-three separate documents requesting action were submitted to Congress. That array of legislation, often uncoordinated and sometimes unrelated, was the practical basis for the implementation of President Johnson's Great Society. (Kearns, 1976, p. 217; Rich, 1984). The Foster Grandparent Program, established in 1965, was created during this legislative cycle and was promoted as a supplemental income program for low income elderly.

It was no accident that the program focused on poverty and employment. The effects of poverty were especially significant for the elderly because, as a cohort, they experienced the highest poverty level (Harrington, 1969). A frequently cited 1960 Senate report documented that one half of the aged were poor and could not afford decent housing, proper nutrition, adequate medical care or recreation (Harrington, 1969, p. 104). The poverty rates were even higher for non-white aged families, and families headed by females (Lammers, 1983). Even without the poverty, it was suggested that the aged were lonely and isolated and that the United States had some tendencies to produce age as well as racial ghettos (Harrington, 1969, p. 108). The poverty was compounded by chronic disease which was the single greatest disability of old age (Harrington, 1969, p. 116).

The long term poor were cited as being particularly ill when old

because they were ill when young (Harrington, 1969). Government statistics showed that in 1970, five years after the introduction of Medicare, 25 percent of the elderly were still poor. At that time, the elderly poverty rate was more than twice the rate of the rest of the population (U.S. Senate Special Committee on Aging, 1990). Although there has been progress, the long range implications of poverty remain a serious issue for the elderly; poverty is increasingly likely to be long term, persistent and inescapable (Villers Foundation, 1987, p. 57). According to the Villers Foundation, the long term, unrelieved pattern of poverty experienced by the elderly is not experienced by the rest of American society.

Although the scope of the Foster Grandparent Program was small, it was designed as a creative response to age related issues. The idea for the program surfaced in a task force facilitated by sociologists Marvin Taves, Donald Kent and Clark Tibbitts (Puner, 1974, p. 184). The program offered eligible seniors an opportunity to earn a tax free stipend in exchange for working with children. Each Foster Grandparent would serve twenty hours per week and would be reimbursed at a set, hourly, tax-free rate. Because nutritional needs had been identified as an area of concern for low income elderly, enrolled Foster Grandparents were offered a daily meal as an in-kind contribution from the work site. Foster Grandparents would also receive annual physical examinations, transportation assistance and regular, monthly inservice trainings (Litigation Support Services, 1984, p. 5).

The Foster Grandparents were paired with designated supervisors and

specific children who had special needs. In 1965, state institutions for the mentally retarded and orphanages were considered to have the largest pool of special need children and so they were the recipients of Foster Grandparent services (Puner, 1974, p. 184). The twenty hour per week time commitment, stipend reimbursement, monthly training and other support services were considered critical elements in the successful placement of the elderly participants. The task force felt program participation would positively effect the physical health, economic resources and psycho-social adjustment of both the Foster Grandparents and the children who were being served (Puner, 1974, p. 184). Those attainment of those goals was, in fact, supported by a program evaluation which was completed in 1984 (Litigation Support Services, 1984, p. 5).

The Foster Grandparent Program received considerable publicity when the twenty-one pilot programs began operations (Puner, 1974; Rich, 1984). The effort was especially praised for the innovative, intergenerational orientation which it offered. Elderly, who had vague and isolated roles in the United States would offer sustained affection and support to children (Puner, 1974, p. 184-85). The achievements of the child enhanced the sense of accomplishment experienced by the Foster Grandparent (Rich, 1984).

Because it was developed as an employment effort, the program was originally sponsored by the Office of Economic Opportunity. The Foster Grandparent Program was ultimately transferred to the national volunteer

agency, ACTION, in 1971. Following the transfer, the low-income senior participants continued to receive the tax free stipends, but were technically considered volunteers. Some sources consider that the transfer to ACTION was a political decision and suggest President Nixon was concerned that senior employment would mushroom and eventually lead to limited, WPA-type jobs (Puner, 1974, p. 182). A working paper, developed by the National Council of Senior Citizens, suggests that this change of sponsorship ultimately resulted in diminished funding for the program (Puner, 1974, p. 184-85). The program has survived however and in 1989, there were 264 Foster Grandparent projects scattered throughout the fifty states, Puerto Rico, the Virgin Islands and the District of Columbia (ACTION, 1989, p. 6-8).

Communities interested in developing Foster Grandparent Programs generated local match resources and submitted grants to ACTION. Grant allocations were based upon a specified number of stipend reimbursed, "volunteer" positions. Program regulations mandated that funds allocated for the stipend reimbursed positions had to be spent during the twelve month grant period and that all positions must be filled by low-income senior citizens.

Because so much support was given to the enrolled Foster Grandparents, programs evolved stable corps of volunteers. This became an important element to both program managers and program participants. Program managers welcomed a stable core of volunteers because considerable energy was expended in arranging suitable work placements and providing the

mandated support services. The training requirements for program participation involved a considerable investment in terms of time and energy and the loss of volunteers meant a loss of valuable assets (Foley, 1976, p. 54).

Because of their poverty status, the program participants found the daily meals, physical examinations, trainings and the hourly stipend of considerable value. An impact evaluation, conducted through ACTION resources in 1984, demonstrated that program participation provided elders beneficial effects on social, mental, physical and economic functioning levels (Litigation Support Services, 1984, p. 7). Program participants were compared with eligible seniors who were on waiting lists for program participation. Analysis of the economic resource scale demonstrated that participants had consistently better resources than did persons on the wait-list group (Litigation Support Services, 1984, p. 7-8; Rich, 1984). The participants also demonstrated better scores on all mental health measures. Program participation became so important that even as the elderly volunteers aged, it was difficult for them to consider retirement.

The primary benefits available to the low-income seniors through program participation have remained basically unchanged since 1965. There have, however, been visible organizational and policy changes since the program's original inception. The development of new work sites within communities eligible to receive Foster Grandparent grants has been particularly significant. In 1970, as national efforts to de-institutionalize the placement of

individuals with mental retardation became more prominent, local communities began to develop options for the care and support of children with developmental disabilities. Instead of assignment only to State institutions, Foster Grandparents became increasingly visible in local schools, day care centers and Head Start programs.

The expansion of Foster Grandparent Program into local communities presented some new challenges for both Foster Grandparents and program managers. The identified needs presented by the children who were eligible for services became more diverse. Originally, Foster Grandparents served children who were no more than five years of age (ACTION, 1989). Policy changes allowed Foster Grandparents to work with youth through the age of 21 (ACTION, 1989). Program operating plans, developed during the Reagan and Bush administrations, encouraged Foster Grandparent intervention in areas such as Aids, drug and alcohol abuse, domestic abuse, juvenile delinquency, literacy, support for the dying and the mentally ill (ACTION, 1989, p. 6-7).

Between 1987-1990, programs also began to receive more guidance pertinent to non-discrimination policies. In addition to assuring non-discrimination in areas such as race, creed, age, and national origin, project managers were required to make special efforts to recruit minority, disabled and hard-to-reach individuals (ACTION, 1989, p. 43). Projects were informed of the responsibility, even in the absence of prior discrimination, to take affirmative action to overcome conditions which resulted in limited

participation (ACTION, 1989). In 1988 and 1989, local projects were also encouraged to increase the enrollment of male volunteers (Appendix II). The rationale for increased male participation was not fully explained, but may have been due to the reduced numbers of male participants enrolled in programs. The reduced numbers could suggest the possibility of prior discrimination. There was also the perception that some of the newer emphasis areas, focusing on older children with more challenging problems, might be more appealing to men.

The policy making process common to the United States is unusually complex and confusing (Rich, 1984). There has been the suggestion that the most apt description is the "muddling through" process suggested by Charles Lindblom (Rich, 1984, p. 3). The Foster Grandparent Program is no exception to that rule and presents some interesting and contradictory challenges. The potential services offered by the eligible senior citizens have increased in scope since the program's inception in 1965. Program assignments which deal with drug and alcohol abuse, juvenile delinquency, AIDS, literacy and mental illness are strongly encouraged. Programs are also encouraged to be more cognizant of potential discrimination practices and actively recruit the more disadvantaged, handicapped and hard-to-reach senior citizens. Recent program developments underscore the importance of examining the skills, abilities, and needs of the volunteers in relation to the activities which have been selected for program emphasis (ACTION, 1987). It is important to assess whether it is reasonable to



develop more expanded roles for eligible senior citizens. In that context, the age and the health status of the program participants could be significant issues.

The potential role of the Foster Grandparent is also an issue when examining funding patterns. Since the early 1980s, projects have been actively encouraged to increase local funding for Foster Grandparent positions. Local funding was important because the ranks of the elderly were increasing and yet federal program allocations were remaining static. In building a local funding base, programs stressed the competent and cost effective services available through the Foster Grandparent Program. It is important, therefore, to examine the skill level and the characteristics of the volunteers who choose to enroll in this program. Since the increased participation of male volunteers was presented as an objective in 1988 and 1989, it is important to understand the patterns of poverty from the perspective of gender.

#### STATEMENT OF PROBLEM

This study will discuss specific characteristics of senior citizens who enroll in the Foster Grandparent Program. There is a broad data base available for analysis because the program operates on a national basis and has standardized age and income requirements. The demographic examination reported in this paper will encompass a ten year period and will analyze the age, education, gender and handicapping conditions of eligible participants. A discussion of those specific characteristics will provide a better understanding of

the nature of the Foster Grandparent Program and will identify the senior citizens who are most likely to pursue involvement in such an effort.

A study specific to these issues has not been previously reported. However, both policy changes within the Foster Grandparent Program and demographic changes within the aging population underscore the value of this research. It is important to understand the strengths and the needs of the seniors who enroll in this program in order to effectively manage issues such as recruitment, training, retirement and job development.

## CHAPTER II

### CHANGING TRENDS IN AGING

The nature of the aging population has changed very significantly since 1965 when the Foster Grandparent Program was created. The most notable changes have been in the areas of longevity, health maintenance, the feminization of poverty, and changing retirement practices. Those issues tend to interact with one another and could have a significant impact on the core of low income elderly who become involved in the Foster Grandparent Program.

In terms of longevity, census data clearly indicate the "graying of America". According to the Senate Special Committee on Aging, there is an unprecedented increase in the aging population. For a twenty year period of time ending in 1990, the over 85 age group was growing at seven times the rate of the general population (U.S. Senate Special Committee on Aging, 1984, p. 5). This is an important statistic because the risk of poverty increases with age. The risk of poverty is also significantly greater for women (Davis, Grant and Rowland, 1990, p. 43). The oldest elderly are more likely to have incomes below or just above the poverty level.

Currently, the poverty rate for elders in the over 85 category is 19.2 percent, more than twice the 9.5 rate of those between the ages of 65-74 years

(U.S. Senate Special Committee on Aging, 1990, p. 29). Women comprise 63 percent of elderly people and yet account for 82 percent of poor elders living alone (Davis et al., 1990, p. 43). One factor correlating age and poverty relates to the economic repercussions of widowhood. Recent studies indicate that, due to a lack of survivorship benefits, the value of private pensions almost disappears; often there are few savings or life insurance benefits to compensate for that loss (Hurd and Wise, 1988).

The level of Social Security support available to women is a second factor in the analysis of female poverty. Social Security is more likely to be the sole source of income for women and yet their benefits are significantly less than those paid to men (Kammerman and Kahn, 1987). Women often find that their benefits are reduced because of a number of technicalities (Quadagno and Meyer, 1990, p. 64-65). The jobs held by women and minorities are more often clustered in industries with high job turnover, low wages and low fringe benefits. Oftentimes, the jobs accepted by women involve low skill and are more vulnerable to lay-offs. The lower earnings from these endeavors translates into lower retirement incomes (Hatch, 1990, p. 48-49).

As a result of these factors, elder women in every age group are substantially more likely to be poor than men of the same age (U.S. Senate Special Committee on Aging, 1990). In 1987, the median income of widowed women was 78 percent of the income of widowed men (U.S. Senate Special Committee on Aging, 1990). The oldest women are the poorest. Between

1990-2020, poverty among women is expected to remain high. By the year 2020, poverty among the elderly will be limited almost exclusively to elderly women (Davis et al., 1990).

The growth of the elderly population is also significant in terms of health maintenance. People over the age of 65 have greater health care needs as a group than those under 65 (Callahan, 1987). For example, in the 65 or older age group, 85-100 percent of the elderly display radiographic findings of degenerative joint disease (Mader and Ford, 1987). In a given year, one third of the home dwelling elderly will experience a fall.

Significantly, 50 percent of black persons and 40 percent of white persons over age 65 have either diastolic or systolic hypertension (Applegate, 1987, p. 16). For the elderly, it becomes increasingly difficult to avoid chronic illness. More than four out of five persons aged 65 or older have at least one chronic condition (U.S. Senate Special Committee on Aging, 1990). At least 46 percent of the elderly are limited in their activities because of these chronic conditions (Mader and Ford, 1987, p. 6). A number of these conditions statistically increase with age. Self reports on limits to work, hospitalization rates and days sick in bed also increase with age (Morgan, 1986). In 1986, persons over 65 accounted for twelve percent of the population and yet were responsible for thirty-one percent of all hospital discharges (U.S. Senate Special Committee on Aging, 1990, p. 93). Even though the literature indicates that persons in their sixties and seventies are generally healthier than in past years,

prevalence of long term chronic diseases and disabling conditions rises exponentially with old age (Institute of Medicine, 1986).

The health risks pose a greater problem for low-income elderly. Although 25 percent of elderly persons with incomes over \$35,000 describe their health as excellent, only 11 percent of low income elderly report excellent health (U.S. Senate Special Committee on Aging, 1990, p. 77). Senior citizens with low incomes, rated their health as "fair" or "poor" twice as often as those with higher incomes (Davis et al., 1990, p. 45). Low income elderly have higher mortality and morbidity rates and are more likely to experience functional limitations (Davis et al., 1990).

Because they are more economically at risk, low-income elderly face a greater challenge in accessing health care (U.S. Senate Special Committee on Aging, 1990). Health care costs currently demand an increased share of the average elderly person's budget. In 1966 the average out-of-pocket cost for health care consumed about fifteen percent of a senior citizen's budget. In 1988, the average out-of-pocket cost for health care consumed about eighteen percent of an elderly person's budget (U.S. Senate Special Committee on Aging, 1990). Thus health care is the only budget category on which the elderly spend more money than the non-elderly (U.S. Senate Special Committee on Aging, 1990, p. 58). Because the total budget of the elderly is smaller, the increased health expenditures can constitute a serious threat to economic security. Health care costs are expected to increase on a regular basis. The

rapidly increasing numbers of more aged individuals indicate vastly increased needs for both medical and custodial care (Montgomery and Datwyler, 1990).

Retirement practices have also affected the lifestyle of the aged and are a part of the overall picture of elderly poverty. Public retirement, as commonly visualized in the present society, is a rather new phenomenon. The skilled craftsmanship of the older worker was respected in the nineteenth century and it was important to continue the trade so as to have the mechanisms for survival (Chudacoff and Hareven, 1978). The expectation was lifelong work although many persons died before they reached old age. As recently as 1906, only 4 percent of the population were elderly (Puner, 1974, p. 24-25). As recently as 1930, the majority of men over 65 remained in the labor force (Chudacoff and Hareven, 1978). It was the Social Security Act of 1935 which provided the basis for public retirement and altered the previous economic realities of aging. It defined, more than any other event, the limit of 65 years as the categorization of old age in America (Kart and Manard, 1976, p. 87-100). Retirement was presented as a positive focus and was in part a mechanism for regulating the work force. The efficient retirement of the elderly from the work force made possible the availability of jobs for younger workers (Chudacoff and Hareven, 1978).

The concept of public retirement gained widespread acceptance. Public funded retirement did not project the specter of a welfare payment, even though people received far more in benefits from the system than they had in

fact contributed (Gratton, 1989, p. 11-12). During the 1950s, the average age for retirement began to decline (Quadagno and McClellan, 1989). The trend continued throughout the 1960s and accelerated in the 1980s. Between 1960 and 1986, the labor force participation rates of sixty year old men declined from 83.2 percent to 71.6 percent. By 1987, men as young as 50-54 were exhibiting signs of reduced labor force participation (Quadagno and McClellan, 1989, p. 9). In 1960, the average male who retired spent forty one years in the work force and ten years in retirement (Atkins, 1989). It is expected that by the year 2040, the average retiree will work thirty years and earn twenty-two years of retirement (Atkins, 1989, p. 19). In short, elderly men have experienced retirement as economically viable and desirable.

A different scenario is presented for elderly women and minorities. In 1950, one out of every five elder workers was a woman. By 1987, women accounted for two out of every five elder workers (U.S. Senate Special Committee on Aging, 1990, p. 73). However, the increased employment is not likely to greatly improve the retirement income for the majority of women (Glasse, 1990, p. 73-74). Despite the fact that women are in the work force in increasing numbers, their careers are more likely to be interrupted and their Social Security and pension benefits will be lower (Davis et al., 1990, p. 44).

There are several interrelated reasons for this development. A majority of women work in stereotyped occupations, the traditional female job categories of sales, administrative support and services (U.S. Senate Special



Committee on Aging, 1990, p. 73). Frequently, these occupations lack pension benefits as well as competitive salaries. Women's wages are consistently sixty percent of men's wages (Quadagno, 1990, p. 64-65). Problems related to caring for children, spouses and infirm family members also complicate the employment problem for women. Those responsibilities of caregiving cause both significant career interruption and wage reduction. According to the Brookdale Center of Aging, seventy five percent of all caregivers are women. Finally, trends indicate the increased likelihood of divorce; women have traditionally experienced greater economic repercussions as a result of divorce and the expectation is for greater numbers of women living alone and with limited income (Glasse, 1990, p. 74-75). The combinations of these factors indicate that women will have fewer monetary resources and will be more dependent on Social Security and Supplementary Security Income (U.S. Senate Special Committee on Aging, 1990). Currently, eighty-one percent of the income derived by the poor is generated through Social Security and SSI (U.S. Senate Special Committee on Aging, 1990, p. 42). Strictly on the basis of cash income the oldest old, a substantially feminized unit, have substantially fewer resources than the young elderly (U.S. Senate Special Committee on Aging, 1990, p. 30).

As a result of those factors, elderly men are expected to experience increased opportunities for retirement. For the majority of men, the decision to retire will be based on economics or poor health (Parnes, 1989). In contrast,

elderly women will remain in the work force for longer periods of time. The women are not expected to have the sufficient Social Security income or the additional pensions which would make earlier retirement possible. Elderly women will face the increased likelihood of inadequate retirement income, even though they evidence a long work history (Atchley, 1989).

Because elderly women will have lower pension benefits and will be more dependent on Social Security than will elderly men, women will be more affected by recent changes in the Social Security Act as well as increased Medicare costs. The Social Security Act changes were enacted because the growing numbers of elders and the increased retirement greatly increased federal expenditures. In 1983, four measures were enacted which: a) gradually reduced the size of benefits for those who retire before 65; b) gradually increased the age for full benefits from 65 to 67; c) increased the benefit for deferred retirement; and d) lowered the penalty for workers who continued to work part-time (Boaz, 1987, p. 151-155).

When consideration is given to the age of 67 for Social Security participation, the increasing numbers of women in the work place and the importance of Social Security as a supplemental funding source, the need for part-time work will be more critical. Part-time work after retirement is viewed by the working public of all ages as desirable (Harris et al., 1981). Eighty percent of the elderly involved in a Harris poll felt that the greater availability of part-time work would be helpful (Harris et al., 1981). The availability of part-time work for

skilled senior citizens has been enhanced through the Age Discrimination in Employment Act. Options are reduced, however, for the "discouraged workers" those seniors with fewer skills, less education and increased health complications.

The final factor under discussion which correlates with poverty among the aged is education. The current median level of education among the elderly as a whole is twelve years (U.S. Senate Special Committee on Aging, 1990, p. 111). However, poverty status in old age is significantly influenced by levels of education and interacts with age, sex and other factors in determining economic status (Policy Research Associates, 1989). Poverty rates significantly increase for persons who lack a high school diploma and are as high as 40-60 percent for persons with less than eight years of formal schooling (Policy Research Associates, 1989). In 1987, elderly persons were much less likely to have graduated from high school than was the population twenty-five years of age and older (U.S. Senate Special Committee on Aging, 1990, p. 112). Minority elderly populations report fewer years of formal education and greater risk of poverty. The oldest senior citizens, those over 75 years of age, had completed the fewest years of formal education (U.S. Senate Special Committee on Aging, 1990, p. 112).

Those figures suggest that the lack of educational opportunities has been a factor in the illiteracy rate common to the elderly. Indeed, the most impoverished and the least educated segments of the population report minimal

participation in adult education programs (Hunter et al., 1979, p. 101). Although there is no single standard currently in use which identifies functional literacy, most experts suggest a grade level equivalency, which vacillates between the eighth and twelfth grade levels (Harman, 1987, p. 8). Levels of reading ability are not static and depend upon continued practice. Persons can regress to lower levels if the opportunities for reading are not available (Harman, 1987, p. 6). The absence of literacy at a functional level creates, for the targeted group, a gap with exclusionary consequences (Harman, 1987, p. 34). These are important issues for low-income programs because educational attainment and level of income interact with one another and tend to indicate greater life satisfaction (Litigation Support Services, 1984).

The problems surrounding aging create increasingly complex issues. Recent studies suggest that the changing relationships between age, disease, disability and mortality are of critical importance in determining the need and availability of programs and services (Myers et al., 1986). Available data, simply on the basis of factors such as the gradually increased age for Social Security participation, the need and desire for income subsidy, the increased likelihood of age related health problems and the feminization of poverty, suggests that older persons with a variety of health concerns and education levels will be increasingly visible in the work force. The productivity of this population must be balanced with an understanding of the dramatic increase in disabilities which accompany old age (Morgan, 1986).

These diverse trends produce implications for efforts such as the Foster Grandparent Program and they provided the rationale for this study. Of particular interest is that since all eligible Foster Grandparent Program participants must be elderly and low income, the entry level characteristics of the participants should be examined. This program is particularly sensitive to the changes in demographics. In 1965, the picture of aging was more homogeneous and nearly half of the elderly were considered to be at economic risk. Since 1965, the overall poverty rate experienced by the elderly has been reduced. The poverty rate experienced by men has diminished from 59 percent in 1949 to the current level of 8 percent (U.S. Senate Special Committee on Aging, 1990, p. 25-28). It is now the individuals over 75 years, minorities and women who are at the greatest risk (U.S. Senate Special Committee on Aging, 1990, p. 29-33). Therefore, the Foster Grandparent program could be both maintaining and recruiting an older core of female volunteers. The significantly reduced rate of poverty experienced by men would suggest that reduced numbers of male volunteers would qualify for the program.

The implications for aging are also of significance because the work of the Foster Grandparents has become increasingly challenging. As mentioned earlier, at the program's inception Foster Grandparents provided support primarily to orphanages and institutions for the mentally retarded. During the 1980s, the potential resource of the Foster Grandparents was seen as a possible solutions to problems such as drug and alcohol abuse, child abuse

and neglect, teen pregnancy, juvenile delinquency, AIDS and several other serious social issues (Domestic Volunteer Service Act, amended: 1989). It is important to balance the requirements of the service with the health care realities of the enrolled senior citizens.

The education level of available participants should be examined in order to determine appropriate Foster Grandparent roles. Program participants are encouraged to serve in situations which demand literacy skills and yet, at the same time, low-income elderly report reduced levels of education. Currently, it is suggested that 20-38% of low income elderly do not have functional literacy skills (Harman, 1987, p. 48-51). Volunteers are expected to have individualized job descriptions and child care forms which clarify and enumerate the services to be provided to the identified child.

The gender of the volunteers is important because poverty studies suggest that women endure the greatest risk of poverty. Women also have an increased life expectancy and so there are more aged women than aged men. However, the Foster Grandparent Program has been encouraged to increase the participation of male volunteers. In 1988, programs were asked to increase, by 10 percent, the participation of male volunteers and in 1989, they were asked to seek an 18 percent increase of male volunteers (ACTION, 1990, Appendix II).

The issues discussed throughout this chapter clarify the difficulty in succinctly describing the elderly population. This particular age group was

much more homogeneous when the Foster Grandparent Program was first initiated. However, the senior population has experienced major shifts in the poverty levels, employment practices and health care availability. Because the Foster Grandparent Program is so sensitive to demographics, it is important to understand the characteristics of the senior citizens most likely to select involvement in such an effort. The need for research is further substantiated by the fact that the tasks selected for Foster Grandparent involvement have become increasingly complex.

## CHAPTER III

### METHODS AND PROCEDURES

In order to access information about the entry level characteristics of volunteers, a questionnaire was devised. The questionnaire used straightforward, close ended questions. Such techniques provide for greater uniformity of responses and are more easily processed (Babbie, 1989). It is also important, in the design of the study, to select elements of the population in such a way that descriptions of those elements accurately portray the parameters of the total population. Since the federal agency, ACTION, mandates the age and poverty income status of participating senior citizens, all individuals included in the sample met program specific age and income restrictions. The twenty hour per week work commitment and the hourly stipend are also standardized and regulated by ACTION. The standardization of those factors helped to create a more reliable study which was representative of the eligible senior population.

Data were requested from a random sample of thirty-five settings. These settings were selected from a federally prepared listing of all existing Foster Grandparent programs. The random sample served to reduce researcher bias and offered access to the body of probability theory (Babbie,



1989). Both rural and urban communities were included in the sample. There are wide discrepancies in the literature which discusses the acceptable response rate (Babbie, 1989). However, a response rate of 50% has been determined as adequate for analysis and reporting (Babbie, 1989).

During Phase 1 of the survey, eighteen projects from a broad geographical representation provided information on 325 volunteers. States with participating projects included: Oregon, Montana, South Dakota, North Dakota, Minnesota, Michigan, Pennsylvania, Maine, New York, Hawaii, South Carolina, Virginia and Florida. Four projects declined participation because they did not collect information from the program participants which dealt with education or literacy levels. That particular information has never been federally required. Thirteen projects cited the desire to participate but were unable to provide the requested information either because program records had been destroyed after completion of a successful audit or because there had been changes of sponsorship and loss of records. These thirteen project directors did, however, express considerable interest in the survey and expressed concern over the increasing age of volunteers.

The study design included two phases of data collection.

1. PHASE I: (Fall of 1989). During this initial phase of data collection, questionnaires were sent to the selected sample of thirty-five projects.

Information on entry level characteristics of volunteers in 1980, 1984 and 1988 was requested. Specific entry level variables assessed included age,

gender, education level, fluency in English, and handicapping conditions. This phase established the baseline data and provided a retrospective for examining the characteristics over an eight year period of time.

2. PHASE II: (Winter, 1991). During this phase, projects from Phase I were re-assessed and again asked to provide information of entry level characteristics of volunteers who enrolled in 1990. These data provide a strong base for measuring entry level trends observable over a ten year period of time. The analyses include all available respondent data for the year. Because the information requested was more current and more readily available to project directors, a total of twenty-one projects were able to respond and provide data on 285 volunteers. In addition to the states cited earlier, the following additional states submitted information for the 1990 analysis: California, Illinois, Iowa, Kentucky, Louisiana, Nebraska, Tennessee and Washington.

### INSTRUMENT

Data on the entry level characteristics of age, sex, gender, education level, literacy and handicapping conditions were obtained through a questionnaire developed specifically for this project. A copy of the questionnaire is provided.

### DATA ANALYSIS

The general approach to the data analysis was to provide cross sectional data on the programs for 1980, 1984, 1988 and 1990, to summarize program variables over this period, and to analyze longitudinal changes in program

variables. The criterion for statistical significance was set at .05 so that the probability that an observed effect actually occurred by chance was less than 5 percent. All reported findings are significant at the .05 level unless otherwise stated.

The gender composition of the volunteer population as well as changes in the population over time were evaluated. For gender and handicapping conditions, differences were tested using non-parametric statistical tests (chi square). These tests made no assumption about the underlying distribution of the variables in the population and are appropriate in a situation such as the present one where the variables of interest are binary (in the case of sex) or unlikely to be normally distributed. Differences in age and educational levels were assessed with one way analyses of variance (ANOVA).

The response rate indicated the general interest in the survey. Because the requested information was succinct and straightforward, there was little opportunity for misunderstanding. The broad geographical response helped to insure a study that accurately reflected the parameters of the total population. The reliability of the information was further substantiated because the respondents provided information gathered over a 10 year period of time. This particular information has not been previously tabulated by ACTION. Therefore, the random sample was a reliable technique to use.

It would have been preferable to have obtained an even high response rate. However, the most recent ACTION regulations require that information be

retained for reduced periods of time. It was fortunate that this information was obtained before records were destroyed. In the future, this kind of information may be more difficult to obtain.

## CHAPTER IV

### RESULTS

The results of the study uncover some significant changes which have occurred within the program during the ten year span of time. The corp of newly enrolled volunteers has become older, more handicapped and increasingly feminized. The education level of the volunteers has remained below the mean level of education reported within the elder population. It is important to note that these trends occurred in all of the projects, regardless of geographical location. Project directors, upon returning the results, frequently noted the significance of the changes which had taken place within local programs. This evidence suggests that the core of stable volunteers, which has been a common feature of the Foster Grandparent Program, may be changing.

#### AGE OF VOLUNTEERS

The age of the volunteers is significantly different among the four time periods. A student Neuman-Keuls test indicated that these differences are accounted for by the fact that the 1988 and 1990 groups were significantly older than the 1980 or 1984 groups. The 1980 and 1984 groups do not differ significantly from one another and the 1988 and 1990 groups do not differ significantly from one another. The results do indicate, however, a significant

linear trend with the age of the volunteers increasing over time since 1980.

<u>Year</u>	<u>Mean Age</u>	<u>Standard Deviation</u>
1980	65.7794	4.5609
1984	66.5784	4.8613
1988	68.6129	5.6973
1990	68.7649	5.6554

Ratio: 8.7172

Probability: .0002

$F(2,322) = 8.72; p = .0002$

Finding: significant increase in age.

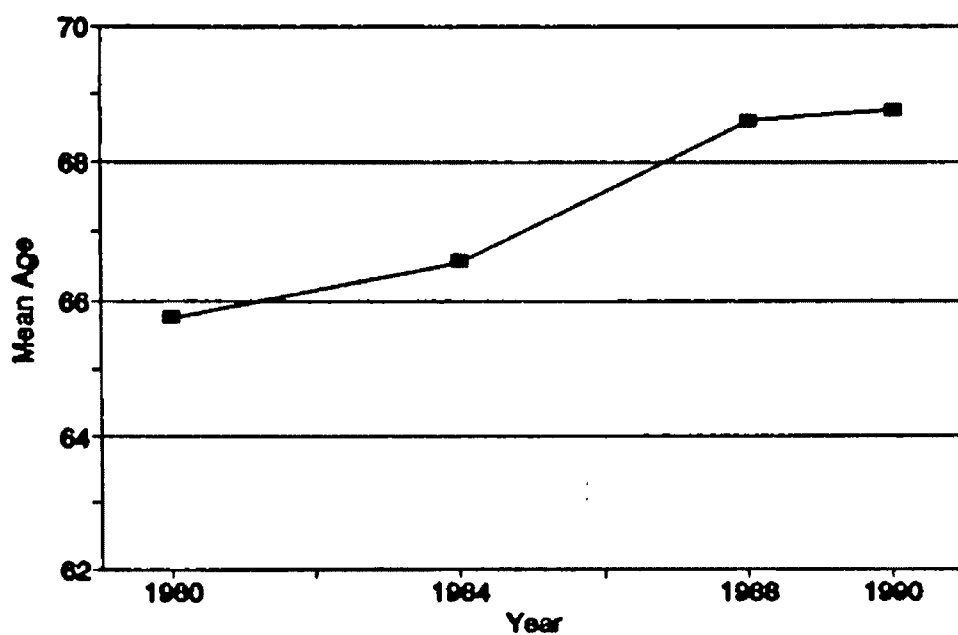
It is also interesting to note that the oldest newly enrolled volunteer in 1980 was 77 years of age. By 1990, the oldest newly enrolled volunteer was 87. The table illustrates the age spread common to each time period.

	1980	1984	1988	1990
Age:	60-77	60-81	60-85	60-87

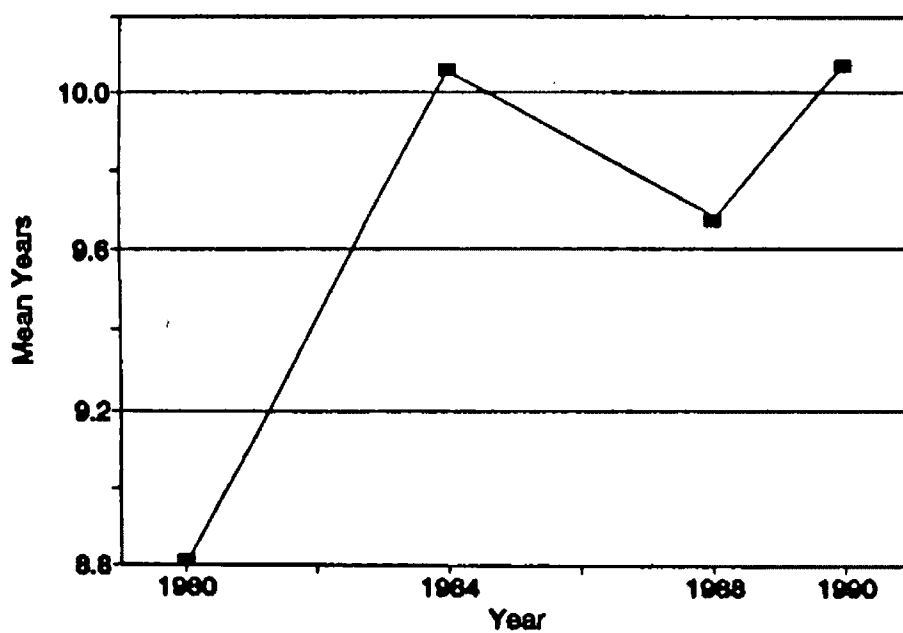
### EDUCATION OF VOLUNTEERS

Education data was available for 272 of the volunteers who were enrolled during Phase 1 of the study and 259 of the volunteers who were enrolled during Phase 2. While the data was fairly clear in 1980, 7 individuals in 1984, 10 individuals in 1988 and 12 individuals in 1990 were described as having high school education or GEDs. It was not clear whether either group of volunteers had, in fact, completed four years of high school. In tabulating

### Age of the volunteers, 1980-1990



### Education of the volunteers, 1980-1990



results, volunteers with the designation "high school education " or GEDs were given credit for twelve years of schooling. Some of the programs surveyed did not request education information from the volunteers. Because of these discrepancies, the overall education level which is reported might be inflated. The education differs among the four time periods and is difficult to interpret. The results demonstrated a large discrepancy in the education levels of the volunteers. There were also regional differences in the education levels. Some volunteers had no formal education, a very small number had college degrees. The females were significantly better educated than the males. However the data was difficult to interpret due to the small numbers of male participants. The data represents a significant linear trend with education increasing over time in the years since 1980. The only significant difference, however, is between the years 1980 and 1990.

<u>Year</u>	<u>Mean</u>	<u>Standard Deviation</u>
1980	8.8103 years	2.8986
1984	10.0633 years	3.0899
1988	9.6667 years	3.1670
1990	10.0772 years	3.1870

Ratio: 2.8142

Probability: .0617

$F(2,269) = 2.81; p = .06; p < .10$



## GENDER OF VOLUNTEERS

The gender distribution of the volunteers differed significantly over time and demonstrated a significant increase in female participation in the Foster Grandparent Programs. This decrease occurred in spite of the fact that programs were encouraged, especially in 1988, to significantly increase male participation. The females were significantly younger than the males. However, interpretation was difficult due to the small numbers of males. The table rather clearly shows the extent of the increased feminization.

<u>Year</u>	<u>%Male</u>	<u>%Female</u>
1980	19.1 %	80.9 %
1984	11.8 %	88.2 %
1988	7.1 %	92.9 %
1990	7.7 %	92.3 %

Chi square with 3 degrees of Freedom = 10.0

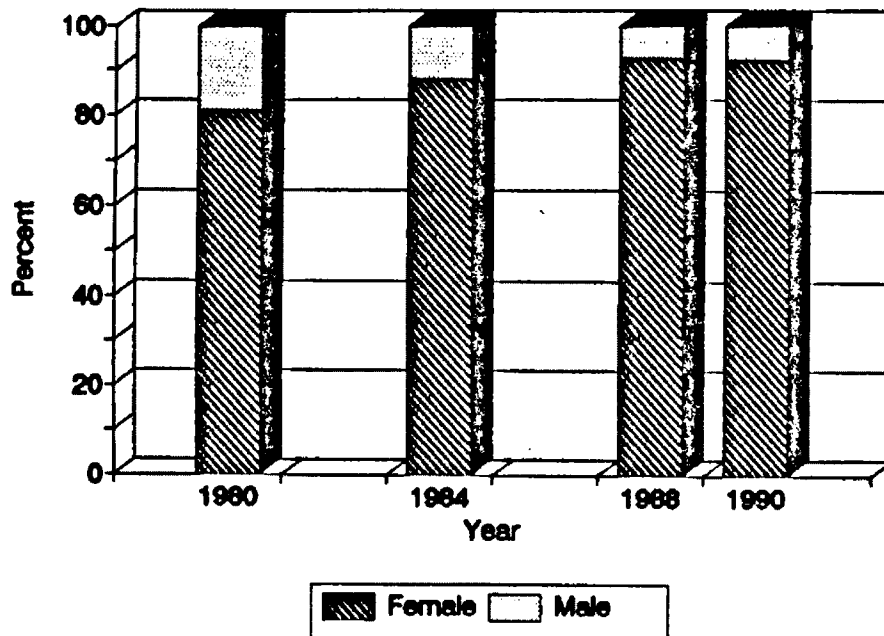
$p < = .02$

Finding: Feminization over time

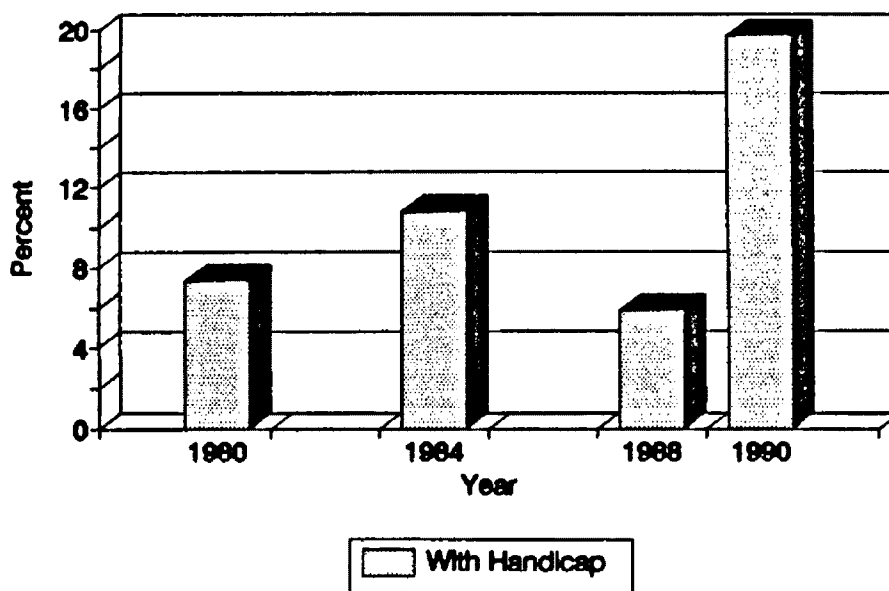
## HANDICAPPING CONDITIONS

In annual reports filed with ACTION, project directors attempt to estimate the number of enrolled volunteers who have handicapping conditions. The percentage of volunteers who had handicapping conditions upon enrollment demonstrated a highly significant increase in 1990. In 1989 and 1990, projects received training in the legal issues of accessibility and projects

## Gender of the volunteers, 1980-1990



## Volunteers with Handicapping Conditions 1980-1990



were encouraged to increase sensitization to handicapped accessibility issues.

The data for 1990 indicated that 56 of the volunteers, nearly twenty percent, had handicapping conditions. The table shows the significance of the increased enrollment of handicapped individuals.

	1980	1984	1988	1990
Percentage:	7.352941	10.78431	5.806452	19.64912

Chi square with 3 degrees of freedom = 20.19,  $p < 0.001$

### LITERACY

It was not possible to retrieve detailed information on literacy. Project directors indicated that they did not request information on reading ability and found it hard to judge literacy, even after supervising the volunteers for some time. Although illiteracy was frequently suspected, especially in cases where volunteers had very little or no formal education, there was no documentation provided. In accompanying letters, project directors did note an increase in minority participation and suggested that difficulties in dealing with multi-lingual cultures was becoming more common.

In summary, the information in this study substantiated the changing characteristics of the seniors who choose to participate in the Foster Grandparent Program. In spite of conscious efforts to recruit additional males, the programs became increasingly feminized. Although the over 60 population has been growing at a rapid rate, seniors who enter this program are older than seniors who formerly enrolled in the program. The increased participation of

Foster Grandparents who have handicapping conditions was particularly significant.

The changes, evidenced by the senior citizens who are eligible for this program, do have important ramifications for project management and development. The significance of those changes and recommendations for future consideration are discussed in the following two chapters.

## CHAPTER V

### DISCUSSION

The results of this study present important implications for the Foster Grandparent Program. Although the program has been in existence since 1965, this study was the first attempt to examine the changing entry level characteristics of newly enrolled volunteers and to relate those changes to federal program mandates. The most significant findings relate to increased entry level age of volunteers, the increased rate of feminization within the program, and the level of education which is common to low-income elderly. It is somewhat difficult to discuss these issues separately because they tend to interact with one another. There are more older women than there are older men, and women are staying in the work force for a greater number of years. As discussed earlier in the paper, the risks of poverty increase with age and with fewer years of formal education. Women also experience a greater risk of poverty than do men.

#### ENTRY LEVEL AGE

There has been a significant increase in the entry level age of the volunteers. There could be several reasons for this development. Volunteers may be delaying retirement and opting for program involvement when they are

no longer physically or emotionally able to work on a full time basis. The retirement information, presented earlier in this paper, suggests that increasing numbers of older women are remaining in the work force (Davis et al., 1990, p. 44). The primary reason for these decision to remain in the workforce is apparently economic. Since older women have reduced Social Security benefits and fewer pension benefits, it becomes more imperative to remain working on a full time basis for as long as possible. The literature supports the contention that retirement choices are based largely on economic issues (Fields, 1984; Lammers, 1983). Persons with higher potential retirement incomes choose to retire earlier (Aaron and Burtless, 1984; p. 160). If a person feels economically unable to retire, only severe problems with work or health will induce retirement (Lammers, 1983; p. 126).

Social Security benefits are particularly important to low income elderly because the benefits comprise 90 percent of their income (Fields and Mitchell, 1984). Because this percentage is so substantial, low income elderly cannot afford early retirement and the resulting decrease in the benefit package. Recent studies suggest that most retirees with inadequate retirement income were steadily employed from entry into the labor force until their retirement (Atchley, 1989, p. 21). However, those who depend solely on Social Security are not be able to replace pre-retirement incomes (Lammers, 1983). The replacement rate is at the 52 percent level for single workers who had been earning minimum wage prior to retirement (Lammers, 1983, p. 109).

Because of these issues, the low income elderly population is the most vulnerable to changes in Medicare and Social Security legislation as well as inflation (U.S. Senate Special Committee on Aging). Participation in efforts such as the Foster Grandparent Program becomes viable when the need to reduce full time hours is balanced with the need to maintain an income subsidy. The income requirements for stipend-based volunteer programs insure that only persons who meet income ceilings are eligible for program participation. Because of these restrictions, it is increasingly likely that women will be at least 65 years of age and in economic distress prior to enrolling in the Foster Grandparent Program.

Age is certainly a factor in the increased expenditures needed for medical care and there could be a relationship between the age of the volunteers and growing health care costs. The need to access medical care could make income subsidy more critical. Low income elderly are less likely to report good health and more likely to have increased health needs (U.S. Senate Special Committee on Aging, 1990, p. 77). The greater prevalence of age-related chronic conditions mandates increased access to medical care and increased use of prescription drugs. The elderly currently use twice as many prescription drugs as do other segments of the population (U.S. Senate Special Committee on Aging, 1990). Income subsidy then becomes more critical when health care needs demand a larger share of available dollars.

The increased age, regardless of the factors which provoke it, does

suggest the probability of some complications for program management. This is especially true when age-related health issues are given consideration. Currently federal regulations demand that all participants serve on a twenty hour per week schedule and usually on a year-round basis. Aside from the use of accumulated sick or vacation leave, there are currently no provisions for a reduced schedule. Since these programs have, since 1970, carried the banner of volunteerism, there has been no development of a pension or retirement plan. However, only the poor elderly are eligible for these programs and that particular group faces increasing levels of poverty with advancing years.

The increased age could therefore present challenges dealing with both the recruitment and retirement of eligible volunteers. Volunteers may serve fewer years than was previously the norm and a stable core of volunteers may be more difficult to maintain. One respondent noted that, although the local program was large (average number of volunteers: 95), only 315 persons had been enrolled in the seventeen years of program operation. However, as older volunteers enter the programs, they may not be able to offer such long term service. In order to maintain the grant required service years and compensate for unreimbursed days of hospitalization and sick leave, it may become imperative for project directors to enroll extra volunteers and develop and maintain waiting lists of trained replacements.

This development will make recruitment a more time consuming endeavor. In addition to allocating more time for recruitment, project directors



may face the need to retire more volunteers following fewer years of active service. The need for the income subsidy and the other support services make retirement from the program a difficult issue. A nationwide study of Foster Grandparent Retirement practices, conducted in 1989, demonstrated that the elderly participants retired primarily when health problems prevented their continued involvement (Cook, 1989). The increased costs of age-related health problems made continued program participation a critical issue for these elderly seniors.

In particular, low income seniors cited the difficulty of obtaining needed prescriptions once the monthly stipend check was unavailable. Project directors reported retirement was extremely stressful, the elderly volunteers resisted retirement, project directors delayed dealing with retirement and 73 percent of the projects surveyed had not yet developed any comprehensive retirement protocols (Cook, 1989).

The increased entry level age and the increased likelihood of medical complications could become larger issues when selecting appropriate roles for Foster Grandparents. As discussed, the "Points of Light Initiatives", suggested by the Bush administration, place special emphasis on drug and alcohol abuse, AIDS, literacy efforts, teen pregnancy, juvenile delinquency, child abuse and neglect (ACTION, 1989). These initiatives suggest potentially challenging placements for an increasingly older core of volunteers. Intelligent placement of volunteers demands a knowledge of the needed skills and a matching of people

to task (Foley, 1976). The evidence from the Baltimore Longitudinal Studies substantiates a decline in learning, memory and problem solving which accompanies old age (Arenberg, 1984, p. 41). The physical disabilities which accompany old age may also complicate the process of successfully matching people to task. The statistical probability of auditory and visual problems increases with age. Most individuals over age 70 report problems with dizziness and loss of balance. Falls associated with dizziness and loss of balance account for more than one-half of all accidental deaths among older people (National Institute on Aging, 1990, p. 38). An older core of volunteers report increased problems with chronic handicapping conditions.

In summary, an older core of volunteers could affect the selection of appropriate work sites and the recruitment and retirement of potential participants. It should also have an impact on program guidelines which determine sick and vacation leave policies and which regulate the numbers of hours which each volunteer must provide.

### EDUCATION LEVELS

Education data was available for 531 of the volunteers who were enrolled in seventeen projects. Some programs did not ascertain education level upon enrollment and so were not able to provide any data or were unable to provide information about all of the enrolled volunteers. In general, education information was unavailable for a significant number of the volunteers.

As reported earlier in this paper, poverty status in old age is significantly affected by the completed level of education. Higher educational attainment contributes to high Social Security payments, pensions and other sources of income. White men with at least one year of college education had poverty rates just under 2 percent (Policy Research Associates, 1989, p. 4). For elderly with a high school diploma, the poverty rate of 7.3 percent is recorded. Elderly black women with only one to five years of elementary education, have a poverty rate of over 60 percent (Policy Research Associates, 1989, p. 4). A lifetime of reduced levels of education and low-pay, low-skills jobs, significantly contributes to poverty risks in old age. It is also interesting to note that, on a national level, nonwhites and those who failed to complete eight years of education retire at younger ages (Aaron and Burtless, 1984, p. 159). The speculation is that the work years were spent in more physically demanding occupations and retirement became necessary because of physical health issues (Aaron and Burtless, 1990).

It is important that the surveyed population did not meet the median level of education, twelve years, which is found among elderly as a whole (U.S. Senate Special Committee on Aging, 1990, p. 111). This was apparent, even when the participants were given the benefit of doubt and credited with 12 years of education when either "high school education" or "GED" was reported. Thus the reduced level of education found in the stipend based volunteer programs is probably valid and may well be indicative of long term poverty.

In terms of program development, the diversity in the educational backgrounds of the program participants could prove to be a challenging issue and should be addressed. It may mandate increased monitoring of placements in order to assess the elderly volunteer's needs for additional training. At least 25 percent of Americans who are illiterate are over 65 years of age. Three quarters of the elderly who report less than high school education have not completed grade school (Harman, 1987, p. 48). Given the available national statistics on illiteracy among the elderly, it is reasonable to assume that a group of low-income seniors who report less education than the national norm have greater problems with functional literacy.

Problems with literacy could have an impact on the volunteer's ability to follow child care plans and job descriptions. Illiteracy could also make it increasingly difficult to fulfill the expectations found in more challenging work sites. In general, the reported education level supports the need for program directors to understand the functional literacy capabilities of the volunteers prior to job placement. Training protocols should reflect the diversity of the reported educational levels. It is increasingly difficult to provide the same orientation and inservice training to all enrolled participants.

### GENDER

The increased feminization found in the study is significant on several levels. The statistics dealing with female participation certainly correlate with the studies documenting the increased poverty level experienced by women.

Income levels of women lag considerably behind those of men (Lammers, 1983, p. 212). With more advanced age, widowhood and increased economic distress become more likely.

The death of a spouse can cause a substantial decrease in benefits, ranging from one-half to one-third of the couple's previous level (Davis et al., 1990, p. 44). The value of private pensions almost disappears and often there are few savings or life insurance benefits. The Retirement History Survey found that 80 percent of the poor elderly are single persons or widows (Hurd and Wise, 1988). A study, conducted through the National Bureau of Economic Research, showed that about half of the poor widows were not poor before the death of their husbands (Davis et al., 1990, p. 44-45). However, medical and funeral expenses, the loss of pensions, the decrease of Social Security benefits and even the possible long term care of a husband who was ill and possibly forced to retire early, all served to complicate economic stability. The current evidence indicates that women are more likely than men to be widowed and to live alone and that a woman's risk of impoverishment is greater. The evidence suggests that the concentration of poverty among elderly women who are living alone will increase as we enter the next century. The numbers of elderly men who are poor and living alone are expected to virtually disappear (Davis et al., 1990, pp. 43-45).

Because women are more likely to be living on reduced Social Security checks, they will more likely need an income subsidy. Caregiving

responsibilities for both children and older dependent family members limit employment options and potential pension options for many women. On average, women spend 11.5 years out of the paid labor force because of caregiving responsibilities while men spend about 1.3 years out of the labor force (Davis et al., 1990, p. 44). Since the risk of economic impoverishment occurs with increased age and often after widowhood, it makes sense that the women are now older upon entry into the Foster Grandparent Program and are entering the program in increasing numbers.

The increased feminization within the program is also justifiable from a socio-psychological perspective. Feminine identification processes are relational and stress affective relationships with others (Chodorow, 1978, p. 176). An effort, such as the Foster Grandparent Program would support the relational, familial role models with which many elderly women identify.

The increased feminization is also significant in light of studies which suggest older women may be decreasing or at least postponing volunteer endeavors (Institute of Medicine, 1986). In 1950, one out of every five older workers was a woman. By 1987, women accounted for two out of every five older workers (U.S. Senate Special Committee on Aging, 1990, p. 73). In 1965, the elderly formed an essentially homogeneous population. Poverty was present in the majority of the elderly population and women in their early sixties were interested in joining the Foster Grandparent Program. In 1990, it is increasingly likely that women who have marketable skills will remain in the

traditional work force for longer periods of time and will consider volunteer options and the need for post-retirement income at a later point in their lives.

The gender issue is a factor in program management because recent program guidelines have encouraged the increased participation of males. ACTION suggested increasing male participation on the theory that increased life expectancy among males and more varied work sites would translate into greater male interest in stipend based programs. Nationally, programs have been encouraged to actively recruit males and to develop work stations which would be appealing to men. During 1988 and 1989, programs were provided with suggested male quotas. That initiative is not realistic when it is countered with the vastly different poverty risks shared by men and women. Since 1950, men have experienced a steadily decreasing risk of poverty. Women and minorities have experienced an increased risk of poverty and that trend is projected to continue.

The program will probably see a continued trend of increased feminization and program involvement which occurs following the increased experience of economic risk. It would not be surprising, therefore, to see older women with escalating health problems opt for program involvement.

#### HANDICAPPING CONDITIONS

The issues of handicapped awareness and accessibility began receiving more attention in 1989 and 1990. The ACTION regional training sessions, conducted throughout 1990, provided specific sessions which dealt

with the issues of discrimination and handicapped accessibility. Project directors were informed of the legal requirements of equal opportunity access, even when access meant greater programmatic challenges. Particular attention was directed toward program implementation of the Americans with Disabilities Act, Titles I and II. The 1990 grant renewal packets had to include proof of equal opportunity policy statements. Materials were provided to help project directors validate equal opportunity compliance. In 1991, projects were further required to complete detailed handicapped accessibility forms for all work stations utilizing volunteers.

The increased participation of handicapped individuals could be a result of the greater knowledge and sensitivity gained by project directors and could demonstrate efforts towards compliance with federal standards. The advanced age of the volunteers and the increased likelihood of age related disabilities could also relate to the increases in participation. Elderly women do have more chronic health problems than do elderly men and the increased enrollment of women could relate to the increases in the handicapped population.

The findings do suggest some important considerations for program development. The program is enrolling an older, less educated and more disabled population. The poverty of the seniors who are eligible for this program underscores the importance of the tax-free stipend. Although the sum provided is only \$2.35 per hour, it is a significant income enhancement.



Retirement from the program presents a financial burden and volunteers usually attempt to delay it as long as possible (Cook, 1989). However, it is questionable whether all of the seniors who are entering these programs are capable of the year-round, 20 hour per week time commitment. The time commitment becomes even more difficult in light of the more challenging roles that have recently been developed for Foster Grandparent involvement.

## CHAPTER VI

### SOLUTIONS FOR FUTURE PROGRAM MANAGEMENT

The advanced entry level age of volunteers could provide some specific challenges for sound program management. As discussed earlier, there may be a need for both increased recruitment of eligible volunteers and more demand for retirement procedures. Recruitment may prove to be a challenge because the federal income restrictions insure that an older clientele will most likely fit the criteria for program involvement. This older clientele may well have greater health care needs, more disabilities and fewer job-related skills. As alternate older worker programs become more visible within communities, elderly individuals with more skills and fewer health problems may opt for greater financial gains. The tax-free stipend offered to participating Foster Grandparents is significantly below minimum wage standards. The risk is that future Foster Grandparents could be persons who have fewer options and greater needs than those who enrolled in earlier years.

In considering the needs of program participants, the feasibility of rigidly maintaining the requirement of a twenty hour per week schedule becomes a larger issue. As program participants age, fulfillment of that amount of service may prove difficult. However, absolute retirement remains

problematic for Foster Grandparents because of their lowered economic status and the loss of the stipend. A reduction of the required hours of service would be particularly helpful if used in conjunction with a viable retirement plan. The Foster Grandparent could then begin a gradual withdrawal from service and there could be more time to arrange alternate supportive services such as in-home meals, food stamps or housing subsidies. Such an arrangement should be a key part of the retirement plan so that the financial loss experienced by retirement of the grandparent from the program is mitigated as much as possible.

Implementation of services such as rent subsidies, fuel assistance, food stamps and home delivered meals should be critical elements of the retirement plan. Such a protocol might serve to make retirement less offensive to project directors. Under the current model, retirement is often viewed by Foster Grandparents as the ultimate punishment and the loss of a person's last meaningful job. That reality makes the job of retiring Foster Grandparents particularly onerous and stressful for project directors.

As volunteers age, transportation could become a more significant issue. Older people cite the rising costs of transportation as an impediment to enrollment in volunteer programs. This is especially a problem when people cannot afford to own, repair or insure automobiles and when public transportation is largely unavailable (Institute of Medicine and National Research Council, 1986, p. 58). Project directors may need to develop more

comprehensive and costly transportation plans for the enrolled volunteers.

Transportation is an especially important issue when full consideration is given to the increased numbers of individuals who have handicapping conditions.

### TRAINING ISSUES

The training programs, designed by the local project directors, should also undergo examination and possible revision. Particular subjects, such as the development of literacy skills, might demand increased amounts of time. Projects may also be enrolling volunteers with less successful past work experiences and so the program training agendas will address the work skills commonly accepted in professional environments. Research indicates that older persons, once they have decided to participate in efforts such as the Foster Grandparent Program, will need special attention on the job (Institute of Medicine and National Research Council, 1986, p. 69). The volunteers may have been out of organized activities for an extended period of time and may not be familiar with deadlines, working closely with others or working under supervision (Institute of Medicine and National Research Council, 1986, p. 69). For some of these individuals the very idea of job training may be a new concept.

Under the current system programs provide an initial orientation training component and four hours of monthly supplemental training. Programs may find that, in addition to monthly sessions, quarterly training retreats which last for a 2-3 day cycle are needed in order to teach and practice the needed

skills which have been identified. The needs of handicapped individuals will have to be considered when developing these training sessions. Program managers can realistically expect increased participation of volunteers who have visual and auditory problems.

To facilitate competent training, it may be necessary for project directors to target specialized units such as Visual Services Teams or Rehabilitation Teams. These entities could help assess and monitor the needs of the volunteers and provide the ongoing training and support which will be required. Increased enrollment of non-English speaking and non-literate volunteers is also a possibility. This training issue is of particular importance because maintaining the reputation of the program and assuring the quality of services provided by the volunteers could be more challenging.

### PLACEMENT OF VOLUNTEERS

The selection of appropriate work stations is affected by the changing characteristics of the program participants. Accessibility and supportive assistance from the agency staff will probably become more compelling issues. Agency staff should discuss, in advance of the volunteer placement, agency needs and expectations relative to volunteer involvement. Some sites are better able to cope with disabilities, absences, reduced levels of education, and other special needs. The individuals who will be the site agency's core support team for the volunteers should be identified. It may be helpful for the volunteer and the project director to meet with the core support teams on a monthly basis.

This could provide a good opportunity to review job descriptions and child assignments as well as to identify needed areas of training. Because the volunteers could have more needs it is important to develop a format for regular input from the site agencies. The format becomes increasingly important when issues, such as retirement, need to be addressed.

### PROGRAM MANAGEMENT

It is realistic to expect some changes in program management as a result of the changed entry level characteristics. For some project directors the increased responsibilities of recruitment and retirement may be significant. In regular evaluations with site agency staff it may be necessary to address physician recommended interventions. Interventions include issues such as reduced work load and simplification of tasks.

Of particular challenge will be the mandates stipulating timely expenditure of federal funds and fulfillment of the quotas for required hours of volunteer service. It may be helpful for project directors to develop management charts which document the mandated stipend expenditure on a month by month basis. Project directors could then calculate the numbers of volunteers necessary to attain that stipend goal.

Project directors may also choose to develop more clear and comprehensive personnel appraisal practices which stipulate issues such as the protocol for leave without pay, leeway in starting dates of service and re-admittance to the program. A consistent personnel appraisal system with

measurable criteria is important when documenting the need for retirement. Recent amendments to the Age Discrimination and Employment Act eradicated any age ceilings and specifically addressed a proscription of employment practices (Eglit, 1989). Awareness of the implications of the ADEA have been increasing and age claims, based on the ADEA and filed with the EEOC have been increasing in the last few years at a rate faster than those for race and sex discrimination (Eglit, 1989). Speculative replacement jobs that could have been considered prior to severance are becoming larger issues in court scrutiny and increased attention has been paid to the "voluntariness" of retirement. Although volunteeristic in nature, it is realistic to expect that efforts such as the Foster Grandparent Program would attempt to insure that fair practices were implemented and that decisions were made on the basis of objective and substantiated information.

### NEW INITIATIVES

Since 1984, there has been growing interest in channeling Foster Grandparent activities toward underserved or at-risk populations. New initiative placements are frequently challenging and include emphasis on drug and alcohol abuse, illiteracy, juvenile delinquency and other problems. It appears important to consider the characteristics of the volunteers when developing new initiative areas. If it is preferable to have Foster Grandparents serve in more challenging work environments, program compromises may be necessary. Acknowledgement of those compromises is critical because local programs are

required to provide local dollars to support the program. Local funding sources frequently support the program because of the cost effective, competent services that are available. However, in order to acquire the skilled assistance of a Foster Grandparent for a school literacy program, it might be necessary to enroll a Grandparent with more years of formal schooling. In attempting to balance the skills of the volunteers and the more challenging program initiatives, it might be necessary to examine the income guidelines for program participation. The program might find it advantageous to allow a percentage of the volunteers to be over-income. That move might help to increase the skill level of volunteers working in more challenging areas.

The Foster Grandparent Program has proven to be an innovative and creative response to intergenerational issues. The children enjoy the attention of the Foster Grandparents and the volunteers enjoy the opportunity to provide a needed service. The program has proven to be viable since its inception in 1965. In the coming years, as the entry level characteristics of the volunteers change, project directors will face new challenges. An understanding of those challenges and the implementation of protocols to address those challenges must be given serious consideration.



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## APPENDIX I

### ASSESSMENT OF FOSTER GRANDPARENTS UPON ENTRY INTO PROGRAMS

In the 1990 Calendar Year, how many new Foster Grandparents did you enroll into your program? \_\_\_\_\_

In the space below, please list whether they were male or female, or their educational level and their age upon entry into the program.

Gender (M,F)	Age	Education	Gender (M,F)	Age	Education
1.			19.		
2.			20.		
3.			21.		
4.			22.		
5.			23.		
6.			24.		
7.			25.		
8.			26.		
9.			27.		
10.			28.		
11.			29.		
12.			30.		
13.			31.		
14.			32.		
15.			33.		
16.			34.		
17.			35.		
18.					

How many of the new Foster Grandparents did not speak English? \_\_\_\_\_

How many of the new Foster Grandparents did not read or write English? \_\_\_\_\_

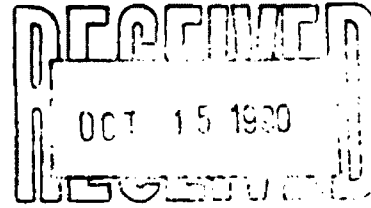
How many of the new Foster Grandparents had a handicapping condition? \_\_\_\_\_

## APPENDIX II



THE FEDERAL DOMESTIC  
VOLUNTEER AGENCY

Region VIII  
Montana State Office  
301 S. Park, Room 192  
Federal Office Bldg., Drawer 10051  
Helena, Montana 59626  
406/449-5404



COLORADO  
MONTANA  
NEBRASKA  
NORTH DAKOTA  
SOUTH DAKOTA  
UTAH  
WYOMING

October 12, 1990

Ann Cook  
FGP/SCP Director  
227 W. Front  
Missoula, MT 59802

Dear Ann:

Following is the information you requested regarding ACTION's objective to increase male participation in the FGP and SCP programs. There was no direction given in this regard for either 1991 or 1990 nor could we find anything for 1987. So we are just listing for 1988 and 1989. Let me know if you want us to research this further.

	<u>FGP</u>	<u>SCP</u>
1989	Increase by 18%	Increase by 6%
1988	Increase by 10%	Increase by 2%

Sincerely,

  
John D. Allen  
State Program Specialist

JDA:jp

VISTA • RETIRED SENIOR VOLUNTEER PROGRAM • SENIOR COMPANION PROGRAM • FOSTER GRANDPARENT PROGRAM